Durham City/County Planning Zoning Map Change Application						
Submittal Date: 12-14- ZOC				r: Z0900019		
Requested Zone(s): (include overlay)			Existing Zone(s): (include overlay)			
PIN(s): 0843-04-61-0065 0843-04-60-2925 0843-04-60-3622 (PARTIAL) Street Address or Frontage:			Total Site Area: 9.53 AC (414, 830 SP)			
17941721 GLENN SCHOOL RO. Project Name:		I .	Jurisdiction: County (check one) [] City			
GLENN SCHOOL COMMI	ERCIAL			[] City and County		
•	Land Use Desig	jnation) (COMMERCI	A-L.		
Summary of Proposed Development (tyletc): THE INTENSITE OF THE OF THE OF THE OF FLOOR AREA.	oes of uses, numb	er and type	e of residential uni	ts, square footage in non-residential buildings, ・AIN 33, SOO るのひみたと FEET		
Applicant						
Contact Name AND Business Name if a	· -	•				
TIM SIVERS HORVA	TH ASSOCIAT	TES, P.	PA	Time San		
Address: 16 CONSULTANT F City: DURHAM		Jiai	" NC	Applicant Signature Zip Code: Z.7707		
Phone: 919.490.4990	Fax: 919.	490.8	3953	Email: TIM. SIVERS CHORNATHASSOCIATES.CO.		
Agent (if any) Contact Name AND Business Name if a						
Somethame AND Business Name II a	-	A/A				
Address:						
City:	State:	Zip Cod	le:	Agent Signature		
Phone:	Fax:			Email:		
Riodeniy Owner(s) (Allachasepara Name: I. Crom Beatt		Space is	.necessary)	Phone:		
Address:				215.880.8324		
518 THERNBURY L	4んど State:	Zip Code	0:			
HAVERFORD	PA	· -	041	ICBVE COMCAST, NET		
Name:	Δ.			Phone:		
Address:						
City:	State:	Zip Code	e:	Fax:		
				Email:		
Name:	/A			Phone:		
Address:		_	·			
City:	State:	Zip Code	e:	Fax:		
				Email:		

Development Plan prepared by:						
, , , , , , , , , , , , , , , , , , ,	Phone: 919.490.49	990				
1 1	imail: 7m. sivers Chor					
Stormwater Impact Analysis prepared by:	hone:					
f	mail:	i				
	hone: 919 · 872 - 5	115				
	mail: <u>RSTEPHE</u> WSON C R					
Building Design Guidelines/Elevations prepared by:	hone: 555 ABOV	F				
TIM SIVERS HORVATH ASSOCIATES PA	mail: SEE ABOVE					
J	hone:					
N/A	mail:					
Application Checklist						
Each item on the following submittal checklist is to be initialed by the Applicant and/or the Agent, indicating that: • the item is part of the submittal package; • the item is complete; and • the information is accurate A submittal package with items not initialed, or otherwise incomplete or inaccurate, will not be accepted. An application shall be considered to have been accepted for review only after it has been determined to be complete in accordance with Section 3.2.4 of the Unified Development Ordinance, not upon submission to the Planning Department.						
I, the undersigned, acknowledge that the application is complete and that all information included is accurate to the best of my knowledge:						
d-1-	_					
Signature Date Printed Name						
5 Trilled Maint	OIVERS					
Timed Name	9					
APPLICATION ITEM		STAFF ACCEPTANCE				
Timed Name	APPLICANT/AGENT	ACCEPTANCE				
APPLICATION ITEM	APPLICANT/AGENT INITIAL	ACCEPTANCE				
APPLICATION ITEM 1. Application	APPLICANT/AGENT INITIAL					
APPLICATION ITEM 1. Application	APPLICANT/AGENT INITIAL T.5	ACCEPTANCE				
APPLICATION ITEM 1. Application 2. Pre-Submittal Conference form 3. Boundary Map of Area	APPLICANT/AGENT INITIAL TS TS	SW				
APPLICATION ITEM 1. Application 2. Pre-Submittal Conference form	APPLICANT/AGENT INITIAL TS TS	SW				
APPLICATION ITEM 1. Application 2. Pre-Submittal Conference form 3. Boundary Map of Area	APPLICANT/AGENT INITIAL TS TS	ACCEPTANCE				

If submitting with a development plan items 6 – 10 apply:		
5. Development Plan Checklist		
	TS	1.01
		1 30
6. 12 Sets of Full Size Plans		
	TS	
		15W
7. Legible Plan Reduction (11" X 17")		
	TS	
	, -	SW
8. Owner's Acknowledgement Form for each parcel- must include original		
signature for all owners of record	TS	21
Forms included: (#)	1.5	Jow -
9. Stormwater Checklist, 2 copies or memo from City or County Stormwater		
Management	TS	01
		I In
10. Traffic Impact Analysis, 3 copies		
-or- a memo from the City Transportation Division stating a TIA is not	TS	
required.		- 20W
If applicable:	1	
12.Copy of Annexation Request Transmittal (if applicable; it must be filed prior to		
the zoning map change submittal)	N/A	1/0
		NA
13. Has a Land Use Plan Amendment been filed?		
If so, case #	N/A	l alla
(to be completed at time of submittal)	•	N/A
14. Neighborhood Meeting Materials (sign-up sheet from the meeting, summary		
the issues raised, description of how the proposal addresses the issues, copy of meeting notification, list of those notified, copies of materials distributed)	T5	21
- ' '		1/0~
For all applications:		
15. Filing Fee: \$ DEVELOPMENT PLAN \$ 5,491	TS	0 1
TIA REVIEW FEE \$4,1600	75	1 5/W

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